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NEWS	1		Web Page URLs for STN Seminar Schedule - N. America
NEWS	2		"Ask CAS" for self-help around the clock
NEWS	3	JAN 27	Source of Registration (SR) information in REGISTRY updated and searchable
NEWS	4	JAN 27	A new search aid, the Company Name Thesaurus, available in CA/CAplus
NEWS	5	FEB 05	German (DE) application and patent publication number format changes
NEWS	6	MAR 03	MEDLINE and LMEDLINE reloaded
NEWS	7	MAR 03	MEDLINE file segment of TOXCENTER reloaded
NEWS	8	MAR 03	FRANCEPAT now available on STN
NEWS	9	MAR 29	Pharmaceutical Substances (PS) now available on STN
NEWS	10	MAR 29	WPIFV now available on STN
NEWS	11	MAR 29	New monthly current-awareness alert (SDI) frequency in RAPRA
NEWS	12	APR 26	PROMT: New display field available
NEWS	13	APR 26	IFIPAT/IFIUDB/IFICDB: New super search and display field available
NEWS	14	APR 26	LITALERT now available on STN
NEWS	15	APR 27	NLDB: New search and display fields available
NEWS	16	May 10	PROUSDDR now available on STN
NEWS	17	May 19	PROUSDDR: One FREE connect hour, per account, in both May and June 2004
NEWS	18	May 12	EXTEND option available in structure searching
NEWS	19	May 12	Polymer links for the POLYLINK command completed in REGISTRY
NEWS	20	May 17	FRFULL now available on STN
NEWS	21	May 27	STN User Update to be held June 7 and June 8 at the SLA 2004 Conference
NEWS	22	May 27	New UPM (Update Code Maximum) field for more efficient patent SDIs in CAplus
NEWS	23	May 27	CAplus super roles and document types searchable in REGISTRY
NEWS	24	May 27	Explore APOLLIT with free connect time in June 2004

NEWS EXPRESS	MARCH 31 CURRENT WINDOWS VERSION IS V7.00A, CURRENT MACINTOSH VERSION IS V6.0c(ENG) AND V6.0Jc(JP), AND CURRENT DISCOVER FILE IS DATED 26 APRIL 2004
NEWS HOURS	STN Operating Hours Plus Help Desk Availability
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NEWS LOGIN	Welcome Banner and News Items
NEWS PHONE	Direct Dial and Telecommunication Network Access to STN
NEWS WWW	CAS World Wide Web Site (general information)

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FILE 'HOME' ENTERED AT 10:06:44 ON 14 JUN 2004

=> file medline caplus biosis scisearch

COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	0.21	0.21

FILE 'MEDLINE' ENTERED AT 10:07:07 ON 14 JUN 2004

FILE 'CAPLUS' ENTERED AT 10:07:07 ON 14 JUN 2004
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FILE 'BIOSIS' ENTERED AT 10:07:07 ON 14 JUN 2004

FILE 'SCISEARCH' ENTERED AT 10:07:07 ON 14 JUN 2004

=> s latex(w)agglutination
L1 8537 LATEX(W) AGGLUTINATION

=> s l1(s)(ischemia or ischemic or ischaemia)
L2 3 L1(S)(ISCHEMIA OR ISCHEMIC OR ISCHAEMIA)

=> dup rem l2
PROCESSING COMPLETED FOR L2
L3 3 DUP REM L2 (0 DUPLICATES REMOVED)

=> d ibib abs 1-3

L3 ANSWER 1 OF 3 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 1998:629761 SCISEARCH
THE GENUINE ARTICLE: 109PC
TITLE: Utility of a rapid fecal latex agglutination test detecting the neutrophil protein, lactoferrin, for diagnosing inflammatory causes of chronic diarrhea
AUTHOR: Fine K D (Reprint); Ogunji F; George J; Niehaus M D; Guerrant R L
CORPORATE SOURCE: BAYLOR UNIV, MED CTR, GI RES, DIV GASTROINTESTINAL RES, 2ND FLOOR HOBLITZELLE, 3500 GASTON AVE, DALLAS, TX 75246 (Reprint); BAYLOR UNIV, MED CTR, GASTROINTESTINAL PHYSIOL LAB, DALLAS, TX 75246; UNIV VIRGINIA, SCH MED, DIV GEOG & INT MED, CHARLOTTESVILLE, VA 22908
COUNTRY OF AUTHOR: USA
SOURCE: AMERICAN JOURNAL OF GASTROENTEROLOGY, (AUG 1998) Vol. 93, No. 8, pp. 1300-1305.
Publisher: ELSEVIER SCIENCE INC, 655 AVENUE OF THE AMERICAS, NEW YORK, NY 10010.
ISSN: 0002-9270.
DOCUMENT TYPE: Article; Journal
FILE SEGMENT: CLIN
LANGUAGE: English

REFERENCE COUNT: 29

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB Objective: The utility of tests for fecal neutrophils in the setting of chronic diarrhea has not been established. The purpose of this study was to determine the causes of chronic diarrhea associated with fecal neutrophils. Methods: One fecal specimen from each of 10 normal subjects, 26 patients with known microscopic colitis, 13 with celiac sprue, eight with Crohn's disease, four,vith ulcerative colitis, and 103 with chronic diarrhea of unknown origin, as well as 10 fecal specimens from a patient with chronic nongranulomatous enterocolitis were analyzed blindly for the presence of a neutrophil granule protein called lactoferrin using a commercial **latex agglutination** kit, Diagnostic evaluation of the 103 patients with chronic diarrhea was carried out to determine the diagnostic accuracy of this test for chronic inflammatory bowel disease. Results: None of the normal control subjects, three of 39 patients with microscopic colitis or celiac sprue, all 10 specimens from the patient with enterocolitis, and all 12 control patients with ulcerative colitis or Crohn's disease had a positive fecal lactoferrin test. Eleven of 103 patients with chronic diarrhea presenting without a diagnosis had a positive test, and all were diagnosed with an inflammatory condition of the colon (five-, ulcerative colitis; four-, Crohn's disease; one-, **ischemic** colitis; and one-, microscopic colitis). Only one patient with inflammatory bowel disease had a negative lactoferrin test. The sensitivity, specificity, and positive and negative predictive values of the fecal lactoferrin test for ulcerative or Crohn's colitis were 90%, 98%, 82%, and 99%, respectively, Conclusion: The major cause of fecal neutrophils in patients with chronic diarrhea is chronic inflammatory bon el disease of the colon. The **latex agglutination** test for fecal lactoferrin offers a highly sensitive, specific, and simple means for detection of fecal neutrophils in these patients. (Am J Gastroenterol 1998;93:1300-1305. (C) 1998 by Am. Coll. of Gastroenterology).

L3 ANSWER 2 OF 3 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 1998:225732 SCISEARCH
THE GENUINE ARTICLE: ZB487
TITLE: A comparative analysis of antithrombin III and its antibodies concentrations in health and disease.
AUTHOR: Myagkova M A (Reprint); Savitskaya Y A; Aleshkin A V; Sorokovoy K V; Pogozheva A V
CORPORATE SOURCE: RUSSIAN ACAD SCI, INST PHYSIOL ACT SUBST, CHERNOGOLOVKA 142432, RUSSIA (Reprint)
COUNTRY OF AUTHOR: RUSSIA
SOURCE: GEMATOLOGIYA I TRANSFUZIOLOGIYA, (NOV-DEC 1997) Vol. 42, No. 6, pp. 15-18.
Publisher: MINISTERSTVO ZDRAVOOKHRANENIYA, NAUCHNIY PROEZD 6, B-246 MOSCOW, RUSSIA.
ISSN: 0234-5730.
DOCUMENT TYPE: Article; Journal
FILE SEGMENT: CLIN
LANGUAGE: Russian
REFERENCE COUNT: 12

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB Parallel measurements were made of antithrombin III and natural antibodies to it in the serum of donors and patients. **Latex agglutination** and enzyme immunoassay were used. These parameters were found diminished in 30% and 50% of patients with **ischemic** heart disease and peritonitis, respectively. The fall of the above concentrations correlated with clinical symptoms and are diagnostically significant.

L3 ANSWER 3 OF 3 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 91:682728 SCISEARCH
THE GENUINE ARTICLE: GU826
TITLE: NECROTIZING ENTEROCOLITIS IN A PREMATURE-INFANT - POSSIBLE ETIOLOGIC ROLE OF ADENOVIRUS
AUTHOR: METTEY R (Reprint); AGIUS G; CESSANS C
CORPORATE SOURCE: CHU LA MILETRIE, MED ENFANTS CLIN, BP 577, F-86021 POITIERS, FRANCE (Reprint)
COUNTRY OF AUTHOR: FRANCE
SOURCE: MEDECINE ET MALADIES INFECTIEUSES, (1991) Vol. 21, pp. 608-609.
DOCUMENT TYPE: Note; Journal
FILE SEGMENT: CLIN
LANGUAGE: French
REFERENCE COUNT: No References Keyed
ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB We report a case of necrotizing enterocolitis in a 30 weeks old premature infant fed with breast milk. No **ischemic** etiology was present. Bacteriological and parasitological investigations were found to be negative. Only, a positive **latex agglutination** test for Adenoviruses was detected in stools collected the day of the bloody diarrhea. Detailed microbiological examinations are emphasized by this unusual finding because the role of pathogens in this disease deserves further understanding.

=> d his

(FILE 'HOME' ENTERED AT 10:06:44 ON 14 JUN 2004)

FILE 'MEDLINE, CAPLUS, BIOSIS, SCISEARCH' ENTERED AT 10:07:07 ON 14 JUN 2004
L1 8537 S LATEX(W)AGGLUTINATION
L2 3 S L1(S)(ISCHEMIA OR ISCHEMIC OR ISCHAEMIA)
L3 3 DUP REM L2 (0 DUPLICATES REMOVED)

=> s l1(p)(ischemi? or ischaemi?)
L4 8 L1(P)(ISCHEMI? OR ISCHAEMI?)

=> dup rem l4
PROCESSING COMPLETED FOR L4
L5 4 DUP REM L4 (4 DUPLICATES REMOVED)

=> d ibib abs 1-4

L5 ANSWER 1 OF 4 MEDLINE on STN DUPLICATE 1
ACCESSION NUMBER: 1998370552 MEDLINE
DOCUMENT NUMBER: PubMed ID: 9707055
TITLE: Utility of a rapid fecal latex agglutination test detecting the neutrophil protein, lactoferrin, for diagnosing inflammatory causes of chronic diarrhea.
AUTHOR: Fine K D; Ogunji F; George J; Niehaus M D; Guerrant R L
CORPORATE SOURCE: Division of Gastrointestinal Research, Baylor University Medical Center, Dallas, Texas 75246, USA.
SOURCE: American journal of gastroenterology, (1998 Aug) 93 (8) 1300-5.
Journal code: 0421030. ISSN: 0002-9270.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals

ENTRY MONTH: 199809
ENTRY DATE: Entered STN: 19980910
Last Updated on STN: 19980910
Entered Medline: 19980903

AB OBJECTIVE: The utility of tests for fecal neutrophils in the setting of chronic diarrhea has not been established. The purpose of this study was to determine the causes of chronic diarrhea associated with fecal neutrophils. METHODS: One fecal specimen from each of 10 normal subjects, 26 patients with known microscopic colitis, 13 with celiac sprue, eight with Crohn's disease, four with ulcerative colitis, and 103 with chronic diarrhea of unknown origin, as well as 10 fecal specimens from a patient with chronic nongranulomatous enterocolitis were analyzed blindly for the presence of a neutrophil granule protein called lactoferrin using a commercial **latex agglutination** kit. Diagnostic evaluation of the 103 patients with chronic diarrhea was carried out to determine the diagnostic accuracy of this test for chronic inflammatory bowel disease. RESULTS: None of the normal control subjects, three of 39 patients with microscopic colitis or celiac sprue, all 10 specimens from the patient with enterocolitis, and all 12 control patients with ulcerative colitis or Crohn's disease had a positive fecal lactoferrin test. Eleven of 103 patients with chronic diarrhea presenting without a diagnosis had a positive test, and all were diagnosed with an inflammatory condition of the colon (five-, ulcerative colitis; four-, Crohn's disease; one-, **ischemic** colitis; and one-, microscopic colitis). Only one patient with inflammatory bowel disease had a negative lactoferrin test. The sensitivity, specificity, and positive and negative predictive values of the fecal lactoferrin test for ulcerative or Crohn's colitis were 90%, 98%, 82%, and 99%, respectively. CONCLUSION: The major cause of fecal neutrophils in patients with chronic diarrhea is chronic inflammatory bowel disease of the colon. The **latex agglutination** test for fecal lactoferrin offers a highly sensitive, specific, and simple means for detection of fecal neutrophils in these patients.

L5 ANSWER 2 OF 4 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
DUPLICATE 2
ACCESSION NUMBER: 1998:88644 BIOSIS
DOCUMENT NUMBER: PREV199800088644
TITLE: A comparative analysis of antithrombin III and its antibodies concentrations in health and disease.
AUTHOR(S): Myagkova, M. A.; Savitskaya, Yu. A.; Aleshkin, A. V.; Sorokovoi, K. V.; Pogozheva, A. V.
CORPORATE SOURCE: Inst. Physiol. Act. Subst., Russ. Acad. Sci., Chernogolovka, Russia
SOURCE: Gematologiya i Transfuziologiya, (Nov.-Dec., 1997) Vol. 42, No. 6, pp. 15-18. print.
CODEN: GETRE8. ISSN: 0234-5730.
DOCUMENT TYPE: Article
LANGUAGE: Russian
ENTRY DATE: Entered STN: 25 Feb 1998
Last Updated on STN: 25 Feb 1998

AB Parallel measurements were made of antithrombin III and natural antibodies to it in the serum of donors and patients. **Latex agglutination** and enzyme immunoassay were used. These parameters were found diminished in 30% and 50% of patients with **ischemic** heart disease and peritonitis, respectively. The fall of the above concentrations correlated with clinical symptoms and are diagnostically significant.

L5 ANSWER 3 OF 4 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 91:682728 SCISEARCH

THE GENUINE ARTICLE: GU826
TITLE: NECROTIZING ENTEROCOLITIS IN A PREMATURE-INFANT - POSSIBLE ETIOLOGIC ROLE OF ADENOVIRUS
AUTHOR: METTEY R (Reprint); AGIUS G; CESSANS C
CORPORATE SOURCE: CHU LA MILETRIE, MED ENFANTS CLIN, BP 577, F-86021 POITIERS, FRANCE (Reprint)
COUNTRY OF AUTHOR: FRANCE
SOURCE: MEDECINE ET MALADIES INFECTIEUSES, (1991) Vol. 21, pp. 608-609.
DOCUMENT TYPE: Note; Journal
FILE SEGMENT: CLIN
LANGUAGE: French
REFERENCE COUNT: No References Keyed
ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB We report a case of necrotizing enterocolitis in a 30 weeks old premature infant fed with breast milk. No **ischemic** etiology was present. Bacteriological and parasitological investigations were found to be negative. Only, a positive **latex agglutination** test for Adenoviruses was detected in stools collected the day of the bloody diarrhea. Detailed microbiological examinations are emphasized by this unusual finding because the role of pathogens in this disease deserves further understanding.

L5 ANSWER 4 OF 4 MEDLINE on STN DUPLICATE 3
ACCESSION NUMBER: 87280560 MEDLINE
DOCUMENT NUMBER: PubMed ID: 3038936
TITLE: Evaluation of a commercial latex agglutination test for detecting antibodies to cytomegalovirus in organ donors and transplant recipients.
AUTHOR: Gray J J; Alvey B; Smith D J; Wreghitt T G
SOURCE: Journal of virological methods, (1987 May) 16 (1-2) 13-9. Journal code: 8005839. ISSN: 0166-0934.
PUB. COUNTRY: Netherlands
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198708
ENTRY DATE: Entered STN: 19900305
Last Updated on STN: 19900305
Entered Medline: 19870828

AB A commercial **latex agglutination** test was evaluated for use in detecting CMV antibody in organ donors and transplant recipients. When compared with indirect and competitive enzyme-linked immunosorbent assays (ELISAs) and complement fixation tests (CFT), the test gave concordant results with 96.6% of sera. The **latex agglutination** test was more sensitive than CFT but less sensitive than ELISA. The major advantage of the **latex agglutination** test was its simplicity and rapidity. Taking only 8 min to perform, it is very suitable for testing sera from organ donors, since the time available for such tests is short because of the finite **ischaemic** time, particularly for liver and heart transplantation.

=> d his

(FILE 'HOME' ENTERED AT 10:06:44 ON 14 JUN 2004)

FILE 'MEDLINE, CAPLUS, BIOSIS, SCISEARCH' ENTERED AT 10:07:07 ON 14 JUN 2004
L1 8537 S LATEX(W)AGGLUTINATION
L2 3 S L1(S)(ISCHEMIA OR ISCHEMIC OR ISCHAEMIA)

```
L3            3 DUP REM L2 (0 DUPLICATES REMOVED)
L4            8 S L1(P)(ISCHEMI? OR ISCHAEMI?)
L5            4 DUP REM L4 (4 DUPLICATES REMOVED)

=> s (ischem? or ischaem?)(s)(brain or neurolog?)
L6       84070 (ISCHEM? OR ISCHAEM?)(S)(BRAIN OR NEUROLOG?)

=> s l6 and l1
L7            0 L6 AND L1

=> s (ischem? or ischaem?) and l1
L8           11 (ISCHEM? OR ISCHAEM?) AND L1

=> dup rem l8
PROCESSING COMPLETED FOR L8
L9            7 DUP REM L8 (4 DUPLICATES REMOVED)

=> d ibib abs 1-7

L9   ANSWER 1 OF 7  CAPLUS  COPYRIGHT 2004 ACS on STN
ACCESSION NUMBER:         2004:180385  CAPLUS
DOCUMENT NUMBER:          140:213561
TITLE:                    Diagnostic kit for predicting development of acute
                          coronary syndrome
INVENTOR(S):              Uchida, Ichio; Mashiba, Shinichi
PATENT ASSIGNEE(S):       Ikagaku K. K., Japan
SOURCE:                   Jpn. Kokai Tokkyo Koho, 15 pp.
                          CODEN: JKXXAF
DOCUMENT TYPE:            Patent
LANGUAGE:                 Japanese
FAMILY ACC. NUM. COUNT:   1
PATENT INFORMATION:

     PATENT NO.        KIND  DATE           APPLICATION NO.  DATE
     ---------------   ----  --------       ---------------  --------
     JP 2004069621      A2   20040304       JP 2002-232069   20020808
PRIORITY APPLN. INFO.:                   JP 2002-232069      20020808
AB   A diagnostic kit is provided for predicting the development of acute
     coronary syndrome such as myocardial infarction, unstable angina pectoris
     and ischemic sudden death.  The kit is constituted by using as a
     disease development-predicting marker a protein (e.g., amyloid protein)
     present in a lipoprotein in a blood sample collected from a human as a
     conjugate formed by misfolding, and comprising a measurement means for
     detecting the disease development-predicting marker.  As the measurement
     means, a means for measuring the concentration of a complex consisting of the
     lipoprotein and the disease development-predicting marker is suitably
     used.

L9   ANSWER 2 OF 7     MEDLINE on STN                    DUPLICATE 1
ACCESSION NUMBER:   1998370552     MEDLINE
DOCUMENT NUMBER:    PubMed ID: 9707055
TITLE:              Utility of a rapid fecal latex
                    agglutination test detecting the neutrophil
                    protein, lactoferrin, for diagnosing inflammatory causes of
                    chronic diarrhea.
AUTHOR:             Fine K D; Ogunji F; George J; Niehaus M D; Guerrant R L
CORPORATE SOURCE:   Division of Gastrointestinal Research, Baylor University
                    Medical Center, Dallas, Texas 75246, USA.
SOURCE:             American journal of gastroenterology, (1998 Aug) 93 (8)
                    1300-5.
                    Journal code: 0421030. ISSN: 0002-9270.
```

PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199809
ENTRY DATE: Entered STN: 19980910
Last Updated on STN: 19980910
Entered Medline: 19980903

AB OBJECTIVE: The utility of tests for fecal neutrophils in the setting of chronic diarrhea has not been established. The purpose of this study was to determine the causes of chronic diarrhea associated with fecal neutrophils. METHODS: One fecal specimen from each of 10 normal subjects, 26 patients with known microscopic colitis, 13 with celiac sprue, eight with Crohn's disease, four with ulcerative colitis, and 103 with chronic diarrhea of unknown origin, as well as 10 fecal specimens from a patient with chronic nongranulomatous enterocolitis were analyzed blindly for the presence of a neutrophil granule protein called lactoferrin using a commercial **latex agglutination** kit. Diagnostic evaluation of the 103 patients with chronic diarrhea was carried out to determine the diagnostic accuracy of this test for chronic inflammatory bowel disease. RESULTS: None of the normal control subjects, three of 39 patients with microscopic colitis or celiac sprue, all 10 specimens from the patient with enterocolitis, and all 12 control patients with ulcerative colitis or Crohn's disease had a positive fecal lactoferrin test. Eleven of 103 patients with chronic diarrhea presenting without a diagnosis had a positive test, and all were diagnosed with an inflammatory condition of the colon (five-, ulcerative colitis; four-, Crohn's disease; one-, **ischemic** colitis; and one-, microscopic colitis). Only one patient with inflammatory bowel disease had a negative lactoferrin test. The sensitivity, specificity, and positive and negative predictive values of the fecal lactoferrin test for ulcerative or Crohn's colitis were 90%, 98%, 82%, and 99%, respectively. CONCLUSION: The major cause of fecal neutrophils in patients with chronic diarrhea is chronic inflammatory bowel disease of the colon. The **latex agglutination** test for fecal lactoferrin offers a highly sensitive, specific, and simple means for detection of fecal neutrophils in these patients.

L9 ANSWER 3 OF 7 MEDLINE on STN
ACCESSION NUMBER: 97243628 MEDLINE
DOCUMENT NUMBER: PubMed ID: 9088469
TITLE: Treatment of thromboembolic complications of fulminant meningococcal septic shock.
AUTHOR: Mele J A 3rd; Linder S; Capozzi A
CORPORATE SOURCE: Division of Plastic and Reconstructive Surgery, Saint Francis Memorial Hospital, Bothin Burn Center, San Francisco, CA 94109, USA.
SOURCE: Annals of plastic surgery, (1997 Mar) 38 (3) 283-90. Ref: 29
Journal code: 7805336. ISSN: 0148-7043.
PUB. COUNTRY: United States
DOCUMENT TYPE: (CASE REPORTS)
Journal; Article; (JOURNAL ARTICLE)
General Review; (REVIEW)
(REVIEW, TUTORIAL)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199706
ENTRY DATE: Entered STN: 19970716
Last Updated on STN: 19970716
Entered Medline: 19970630

AB A patient report of fulminant meningococcal septic shock is described. The presentation, hospital course, and reconstructive efforts are outlined, and a brief review of meningococcal infection is included. Emphasis is placed on the algorithm used to determine treatment. A 19-year-old Hispanic male presented with all the hallmarks of Waterhouse-Friderichsen syndrome (WFS)-sudden onset, high fever, dyspnea with intermittent cyanosis, shock, disseminated intravascular coagulopathy, and the development of purpura. The pathognomonic feature of WFS-hemorrhage into the adrenal glands-if present, was not extensive, as he did not require steroid supplementation. Though cerebrospinal fluid **latex agglutination** was negative, his serum was positive for group C Neisseria and admission blood cultures grew Neisseria meningitidis. Thromboembolic complications were systemic with the highest morbidity peripherally in the lower extremities. Care for these injuries involved every rung of the reconstructive ladder-from local wound care and skin grafts to local flaps and microvascular transplantation.

L9 ANSWER 4 OF 7 BIOSIS COPYRIGHT 2004 BIOLOGICAL ABSTRACTS INC. on STN
DUPLICATE 2
ACCESSION NUMBER: 1998:88644 BIOSIS
DOCUMENT NUMBER: PREV199800088644
TITLE: A comparative analysis of antithrombin III and its antibodies concentrations in health and disease.
AUTHOR(S): Myagkova, M. A.; Savitskaya, Yu. A.; Aleshkin, A. V.; Sorokovoi, K. V.; Pogozheva, A. V.
CORPORATE SOURCE: Inst. Physiol. Act. Subst., Russ. Acad. Sci., Chernogolovka, Russia
SOURCE: Gematologiya i Transfuziologiya, (Nov.-Dec., 1997) Vol. 42, No. 6, pp. 15-18. print.
CODEN: GETRE8. ISSN: 0234-5730.
DOCUMENT TYPE: Article
LANGUAGE: Russian
ENTRY DATE: Entered STN: 25 Feb 1998
Last Updated on STN: 25 Feb 1998
AB Parallel measurements were made of antithrombin III and natural antibodies to it in the serum of donors and patients. **Latex agglutination** and enzyme immunoassay were used. These parameters were found diminished in 30% and 50% of patients with **ischemic** heart disease and peritonitis, respectively. The fall of the above concentrations correlated with clinical symptoms and are diagnostically significant.

L9 ANSWER 5 OF 7 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 95:137913 SCISEARCH
THE GENUINE ARTICLE: QG337
TITLE: BIOCHEMICAL MARKERS OF MYOCARDIAL DAMAGE
AUTHOR: BHAYANA V; HENDERSON A R (Reprint)
CORPORATE SOURCE: UNIV WESTERN ONTARIO HOSP, DEPT LAB MED, LONDON, ON N6A 5A5, CANADA (Reprint); UNIV WESTERN ONTARIO HOSP, DEPT LAB MED, LONDON, ON N6A 5A5, CANADA
COUNTRY OF AUTHOR: CANADA
SOURCE: CLINICAL BIOCHEMISTRY, (FEB 1995) Vol. 28, No. 1, pp. 1-29
ISSN: 0009-9120.
DOCUMENT TYPE: General Review; Journal
FILE SEGMENT: LIFE
LANGUAGE: ENGLISH
REFERENCE COUNT: 208
ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS
AB Objective: To assess various biochemical markers of myocardial damage. Methods and Results: Before routinely using any test as a biochemical

marker of myocardial damage, the published evidence for its diagnostic utility must be critically assessed. Such assessment includes receiver operator curve (ROC) curve analyses, confidence interval estimates of claimed sensitivity and specificity values, and the effects of testing in serial and parallel modes. It is also necessary to establish the test's rule-in (high specificity) and rule-out (high sensitivity) decision thresholds that may vary with time after the onset of symptoms. The spectrum of **ischemic** heart disease includes acute (sudden death, non-Q- and Q-wave infarctions) and chronic (stable, unstable, and variant angina) conditions. Biochemical markers of myocardial damage are of most value in the diagnosis of acute **ischemic** heart disease, although increasingly some of these markers are being found to possess a prognostic value in chronic **ischemic** heart disease. The markers of enzymatic activity include aspartate aminotransferase, creatine kinase (together with isoenzymes and isoforms), and lactate dehydrogenase and isoenzymes. Creatine kinase isoenzyme-2 may also be measured immunologically, and this type of assay is in increasing use both because of its speed and because its blood levels rise earlier than the corresponding activities. The commercially available nonenzymatic markers are myoglobin and troponin T; troponin I is expected to become available in late 1995. While myoglobin is a nonspecific indicator of myocardial damage, its diagnostic value is due to its early appearance in blood. Troponin T is more cardiac specific, but the published data appears to suggest that the cardiac specificity of troponin I is superior. Troponin levels become abnormal at about the same time after the onset of symptoms as mass assays of creatine kinase isoenzyme-2; therefore, they are not useful as early markers of myocardial damage.

Conclusion: The availability of these nonenzymatic markers of myocardial damage must force a reassessment of the continued use of the enzymatic markers. Are they necessary, and if so, which ones should be retained?

L9 ANSWER 6 OF 7 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 91:682728 SCISEARCH
THE GENUINE ARTICLE: GU826
TITLE: NECROTIZING ENTEROCOLITIS IN A PREMATURE-INFANT - POSSIBLE ETIOLOGIC ROLE OF ADENOVIRUS
AUTHOR: METTEY R (Reprint); AGIUS G; CESSANS C
CORPORATE SOURCE: CHU LA MILETRIE, MED ENFANTS CLIN, BP 577, F-86021 POITIERS, FRANCE (Reprint)
COUNTRY OF AUTHOR: FRANCE
SOURCE: MEDECINE ET MALADIES INFECTIEUSES, (1991) Vol. 21, pp. 608-609.
DOCUMENT TYPE: Note; Journal
FILE SEGMENT: CLIN
LANGUAGE: French
REFERENCE COUNT: No References Keyed

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB We report a case of necrotizing enterocolitis in a 30 weeks old premature infant fed with breast milk. No **ischemic** etiology was present. Bacteriological and parasitological investigations were found to be negative. Only, a positive **latex agglutination** test for Adenoviruses was detected in stools collected the day of the bloody diarrhea. Detailed microbiological examinations are emphasized by this unusual finding because the role of pathogens in this disease deserves further understanding.

L9 ANSWER 7 OF 7 MEDLINE on STN DUPLICATE 3
ACCESSION NUMBER: 87280560 MEDLINE
DOCUMENT NUMBER: PubMed ID: 3038936
TITLE: Evaluation of a commercial **latex**

agglutination test for detecting antibodies to cytomegalovirus in organ donors and transplant recipients.
AUTHOR: Gray J J; Alvey B; Smith D J; Wreghitt T G
SOURCE: Journal of virological methods, (1987 May) 16 (1-2) 13-9. Journal code: 8005839. ISSN: 0166-0934.
PUB. COUNTRY: Netherlands
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 198708
ENTRY DATE: Entered STN: 19900305
Last Updated on STN: 19900305
Entered Medline: 19870828

AB A commercial **latex agglutination** test was evaluated for use in detecting CMV antibody in organ donors and transplant recipients. When compared with indirect and competitive enzyme-linked immunosorbent assays (ELISAs) and complement fixation tests (CFT), the test gave concordant results with 96.6% of sera. The **latex agglutination** test was more sensitive than CFT but less sensitive than ELISA. The major advantage of the **latex agglutination** test was its simplicity and rapidity. Taking only 8 min to perform, it is very suitable for testing sera from organ donors, since the time available for such tests is short because of the finite **ischaemic** time, particularly for liver and heart transplantation.

```
=> s (nr2a or nr2b)(s)nmda(s)receptor
L10       3087 (NR2A OR NR2B)(S) NMDA(S) RECEPTOR

=> s l10(s)(agonist? or antagonist?)
L11        657 L10(S)(AGONIST? OR ANTAGONIST?)

=> s (measur? or detect?)(s)l10(s)(agonist or antagonist)
L12         43 (MEASUR? OR DETECT?)(S) L10(S)(AGONIST OR ANTAGONIST)

=> dup rem l123
L123 IS NOT VALID HERE
The L-number entered has not been defined in this session, or it
has been deleted.  To see the L-numbers currently defined in this
session, enter DISPLAY HISTORY at an arrow prompt (=>).

=> dup rem l12
PROCESSING COMPLETED FOR L12
L13          43 DUP REM L12 (0 DUPLICATES REMOVED)

=> s l12(p)(ischem? or ischaem?)
L14           4 L12(P)(ISCHEM? OR ISCHAEM?)

=> d ibib abs 1-4

L14  ANSWER 1 OF 4  SCISEARCH  COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER:    2004:133  SCISEARCH
THE GENUINE ARTICLE: 753EF
TITLE:               Neuroprotective effect of ONO-1078, a leukotriene receptor
                     antagonist, on transient global cerebral ischemia in rats
AUTHOR:              Zhang L H; Wei E Q (Reprint)
CORPORATE SOURCE:    Zhejiang Univ, Sch Med, Dept Pharmacol, Hangzhou 310031,
                     Peoples R China (Reprint); Hangzhou Teachers Coll, Sch
                     Med, Hangzhou 310012, Peoples R China
COUNTRY OF AUTHOR:   Peoples R China
SOURCE:              ACTA PHARMACOLOGICA SINICA, (DEC 2003) Vol. 24, No. 12,
```

pp. 1241-1247.
Publisher: ACTA PHARMACOLOGICA SINICA, 294 TAI-YUAN ROAD, SHANGHAI 200031, PEOPLES R CHINA.
ISSN: 1671-4083.
DOCUMENT TYPE: Article; Journal
LANGUAGE: English
REFERENCE COUNT: 27

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB AIM: To determine whether ONO-1078 {pranlukast, 4-oxo-8-[p-(4-phenylbutyloxy)benzoyl-amono]-2-(tetrazol5-yl)-4H-1-benzopyran hemihydrate}, a potent leukotriene **receptor antagonist**, possesses a neuroprotective effect on global cerebral **ischemia** in rats, and to explore its possible mechanism of action. METHODS: Transient global cerebral **ischemia** was induced by four-vessel occlusion for 10 min and followed by 72-h reperfusion. ONO-1078 (0.03-0.3 mg/kg) and edaravone (MCI-186, 3-methyl-1-phenyl-2-pyrazolin-5-one, a neuroprotective agent) 10 mg/kg were ip injected 30 min before **ischemia** and 1 h after reperfusion, and once a day afterward. Neurological outcome was evaluated before **ischemia** and 24, 48, 72 h after reperfusion. Neuron density, the expressions of N-methyl-D-aspartate (**NMDA**) **receptor** subunit proteins (NR1, **NR2A**, NA2B) and vascular cell adhesion molecule 1 (VCAM-1) in the cerebral cortex and hippocampus were **measured** at 72 h after reperfusion. RESULTS: ONO-1078 (0.1, 0. 3 mg/kg) and edaravone (10 mg/kg) improved **ischemia**-induced neurological deficiency and reduced neuron death. ONO-1078 (0.1, 0.3 mg/kg) significantly inhibited the enhanced expression of **NMDA receptor** subunit protein **NR2A** in the cortex and VCAM-1 in the hippocampus of **ischemic** rats. CONCLUSION: ONO-1078 possesses a neuroprotective effect on global cerebral **ischemia** in rats, and its mechanism may be partly related to the inhibition of the upregulation of **NR2A** and VCAM-1 in different regions of the brain.

L14 ANSWER 2 OF 4 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN

ACCESSION NUMBER: 2003:995645 SCISEARCH
THE GENUINE ARTICLE: 741NL
TITLE: Treatment with the snail peptide CGX-1007 reduces DNA damage and alters gene expression of c-fos and bcl-2 following focal ischemic brain injury in rats

AUTHOR: Williams A J (Reprint); Ling G; Berti R; Moffett J R; Yao C; Lu X M; Dave J R; Tortella F C
CORPORATE SOURCE: Walter Reed Army Inst Res, Div Neurosci, Dept Neuropharmacol & Mol Biol, Silver Spring, MD 20910 USA (Reprint); Uniformed Serv Univ Hlth Sci, Bethesda, MD 20814 USA
COUNTRY OF AUTHOR: USA

SOURCE: EXPERIMENTAL BRAIN RESEARCH, (NOV 2003) Vol. 153, No. 1, pp. 16-26.
Publisher: SPRINGER-VERLAG, 175 FIFTH AVE, NEW YORK, NY 10010 USA.
ISSN: 0014-4819.
DOCUMENT TYPE: Article; Journal
LANGUAGE: English
REFERENCE COUNT: 45

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB Delayed cell death following **ischemic** brain injury has been linked to alterations in gene expression. In this study we have evaluated the upregulation of several genes associated with delayed cell death (c-fos, bax, and bcl-2) during the initial 24 h of transient middle cerebral artery occlusion (MCAo) in the rat and the effects of postinjury treatment with the **NR2B** subunit specific **NMDA**

receptor antagonist CGX-1007 (Conantokin-G, Con-G). C-fos mRNA levels peaked at 1 h postinjury in both cortical and subcortical **ischemic** brain regions (30-fold increase), remained elevated at 4 h and returned to within normal, preinjury levels 24 h postinjury. The increase in mRNA levels correlated to increased protein expression in the entire ipsilateral hemisphere at 1 h. Regions of necrosis at 4 h were void of C-Fos immunoreactivity with continued upregulation in surrounding regions. At 24 h, loss of C-Fos staining was observed in the injured hemisphere except for sustained increases along the border of the infarct and in the cingulate cortex of vehicle treated rats. CGX-1007 treatment reduced c-fos expression throughout the infarct region by up to 50%. No significant differences were **measured** in either bcl-2 or bax mRNA expression between treatment groups. However, at 24 h postinjury CGX-1007 treatment was associated with an increase in Bcl-2 immunoreactivity that correlated to a reduction in DNA fragmentation. In conclusion, CGX-1007 effectively attenuated gene expression associated with delayed cell death as related to a neuroprotective relief of cerebral **ischemia.**

L14 ANSWER 3 OF 4 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 2003:379044 SCISEARCH
THE GENUINE ARTICLE: 671QH
TITLE: Functional NMDA receptor subtype 2B is expressed in astrocytes after ischemia in vivo and anoxia in vitro
AUTHOR: Krebs C; Fernandes H B; Sheldon C; Raymond L A; Baimbridge K G (Reprint)
CORPORATE SOURCE: Univ British Columbia, Dept Physiol, 2146 Hlth Sci Mall, Vancouver, BC V6T 1Z3, Canada (Reprint); Univ British Columbia, Dept Physiol, Vancouver, BC V6T 1Z3, Canada; Univ British Columbia, Dept Psychiat, Kinsmen Lab, Vancouver, BC V6T 1Z3, Canada; Univ British Columbia, Brain Res Ctr, Vancouver, BC V6T 1Z3, Canada
COUNTRY OF AUTHOR: Canada
SOURCE: JOURNAL OF NEUROSCIENCE, (15 APR 2003) Vol. 23, No. 8, pp. 3364-3372.
Publisher: SOC NEUROSCIENCE, 11 DUPONT CIRCLE, NW, STE 500, WASHINGTON, DC 20036 USA.
ISSN: 0270-6474.
DOCUMENT TYPE: Article; Journal
LANGUAGE: English
REFERENCE COUNT: 67
ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB **NMDA**-type glutamate receptors play a critical role in neuronal synaptogenesis, plasticity, and excitotoxic death. Recent studies indicate that functional **NMDA** receptors are also expressed in certain glial populations in the normal brain. Using immunohistochemical methods, we **detected** the presence of the **NMDA** **receptor** 2B (**NR2B**) subunit of the **NMDA** **receptor** in neurons but not astrocytes in the CA1 and subicular regions of the rat hippocampus. However, after **ischemia**-induced neuronal death in these regions, double immunohistochemical labeling revealed that **NR2B** subunits colocalized with the astrocyte marker glial fibrillary acid protein and with NR1 subunits that are required for functional **NMDA** receptors. **NR2B** expression was first observed 3 d after **ischemia** and reached a peak at 28 d. At 56 d, only a few **NR2B**-expressing astrocytes were still present. In vitro, when postnatal hippocampal cultures were subjected to 5 min of anoxia, it resulted in **NR2B** expression on astrocytes in the glial feed layer. Imaging of intracellular calcium with postanoxic cultures and astrocytes isolated acutely from the **ischemic** hippocampus revealed a rise in intracellular [Ca2+] after

stimulation with the specific **agonist NMDA.** The response could be blocked reversibly with the competitive **antagonist** 2-amino-5-phosphonovalerate and attenuated by the **NR2B**-selective **antagonist** ifenprodil. Control astrocytes were not responsive to **NMDA** but responded to glutamate. An understanding of the role of astrocytes that express functional **NMDA** receptors in response to **ischemia** may guide development of novel stroke therapies.

L14 ANSWER 4 OF 4 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 2000:139520 SCISEARCH
THE GENUINE ARTICLE: BP50F
TITLE: A double-blind, placebo-controlled study of the safety, tolerability and pharmacokinetics of CP-101,606 in patients with a mild or moderate traumatic brain injury
AUTHOR: Merchant R E (Reprint); Bullock M R; Carmack C A; Shah A K; Wilner K D; Ko G; Williams S A
CORPORATE SOURCE: VIRGINIA COMMONWEALTH UNIV, DIV NEUROSURG, MCV STN, MED COLL VIRGINIA, BOX 980631, RICHMOND, VA 23298 (Reprint); PFIZER INC, DIV CENT RES, GROTON, CT 06340
COUNTRY OF AUTHOR: USA
SOURCE: ANNALS OF THE NEW YORK ACADEMY OF SCIENCES, (NOV 1999) Vol. 890, pp. 42-50.
Publisher: NEW YORK ACAD SCIENCES, 2 EAST 63RD ST, NEW YORK, NY 10021.
ISSN: 0077-8923.
DOCUMENT TYPE: Article; Journal
FILE SEGMENT: LIFE
LANGUAGE: English
REFERENCE COUNT: 11

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB CP-101,606 is a postsynaptic **antagonist** of the glutamate-mediated **NR2B** subunit of the N-methyl-D-aspartate (**NMDA**) **receptor.** When administered intravenously (i.v.) at the time of injury, CP-101,606 Is neuroprotective in animal models of traumatic brain injury (TBI) and **ischemia**, Minimal adverse effects have been observed in normal human volunteers given i.v. doses of up to 3 mg/kg/hr for 72 hours. The objective of the present clinical trial was to assess the safety, pharmacokinetics, and tolerability of CP-101,606 infused for various times in patients who had suffered either an acute moderate or mild TBI (Glasgow Coma Score 9-14) or hemorrhagic stroke, Patients began receiving treatment within 12 hours of brain injury, ii total of 53 subjects (45 with TBI and 8 with stroke) were randomized in a double-blind fashion to receive CP-101,606 or placebo (4 drug:1 placebo). Drug/placebo was administered by i.v. infusion (0.75 mg/kg/hr) for 2 hours and then stopped (n = 25) or continued for 22 hours (n = 4) or 70 hours (n = 24) at a rate of 0.37 mg/kg/hr, Mean plasma drug concentrations were well above the predicted therapeutic concentration of 200 ng/ml within two hours of initiating treatment and were sustained as long as drug was infused. All the patients tolerated their drug/placebo treatment, and there were no clinically significant cardiovascular or hematological abnormalities in either group. A Neurobehavioral Rating Scale, used to **detect** personality changes and behavioral disturbances, indicated that all subjects showed an improvement from their postinjury, predosing baseline but did not significantly differ from each other with respect to type of head injury and/or treatment with drug or placebo. Modified Kurtzke Scoring also showed a similar pattern of improvement irrespective of type of head injury or drug/placebo treatment. This study suggests that CP-101,606, infused for up to 72 hours has no psychotropic effects and is well-tolerated in patients who have sustained a mild or moderate TBI or hemorrhagic stroke.

```
=> d his

     (FILE 'HOME' ENTERED AT 10:06:44 ON 14 JUN 2004)

     FILE 'MEDLINE, CAPLUS, BIOSIS, SCISEARCH' ENTERED AT 10:07:07 ON 14 JUN
     2004
L1          8537 S LATEX(W)AGGLUTINATION
L2             3 S L1(S)(ISCHEMIA OR ISCHEMIC OR ISCHAEMIA)
L3             3 DUP REM L2 (0 DUPLICATES REMOVED)
L4             8 S L1(P)(ISCHEMI? OR ISCHAEMI?)
L5             4 DUP REM L4 (4 DUPLICATES REMOVED)
L6         84070 S (ISCHEM? OR ISCHAEM?)(S)(BRAIN OR NEUROLOG?)
L7             0 S L6 AND L1
L8            11 S (ISCHEM? OR ISCHAEM?) AND L1
L9             7 DUP REM L8 (4 DUPLICATES REMOVED)
L10         3087 S (NR2A OR NR2B)(S)NMDA(S)RECEPTOR
L11          657 S L10(S)(AGONIST? OR ANTAGONIST?)
L12           43 S (MEASUR? OR DETECT?)(S)L10(S)(AGONIST OR ANTAGONIST)
L13           43 DUP REM L12 (0 DUPLICATES REMOVED)
L14            4 S L12(P)(ISCHEM? OR ISCHAEM?)

=> s (measur? or detect?)(s)(glutamate or polyglutamate or homocysteine or
polyhomocysteine)
L15        24402 (MEASUR? OR DETECT?)(S)(GLUTAMATE OR POLYGLUTAMATE OR HOMOCYSTEI
                 NE OR POLYHOMOCYSTEINE)

=> s (measure? or detect?)(s)(nr2a or nr2b)(s)nmda(s)receptor
L16          222 (MEASURE? OR DETECT?)(S)(NR2A OR NR2B)(S) NMDA(S) RECEPTOR

=> s l15 and l16
L17           83 L15 AND L16

=> s l17 and (ischem? or ischaem?)
L18            6 L17 AND (ISCHEM? OR ISCHAEM?)

=> dup rem l18
PROCESSING COMPLETED FOR L18
L19            4 DUP REM L18 (2 DUPLICATES REMOVED)

=> d ibib abs 1-4

L19  ANSWER 1 OF 4  SCISEARCH  COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER:     2003:379044  SCISEARCH
THE GENUINE ARTICLE:  671QH
TITLE:                Functional NMDA receptor subtype 2B is expressed in
                      astrocytes after ischemia in vivo and anoxia in
                      vitro
AUTHOR:               Krebs C; Fernandes H B; Sheldon C; Raymond L A; Baimbridge
                      K G (Reprint)
CORPORATE SOURCE:     Univ British Columbia, Dept Physiol, 2146 Hlth Sci Mall,
                      Vancouver, BC V6T 1Z3, Canada (Reprint); Univ British
                      Columbia, Dept Physiol, Vancouver, BC V6T 1Z3, Canada;
                      Univ British Columbia, Dept Psychiat, Kinsmen Lab,
                      Vancouver, BC V6T 1Z3, Canada; Univ British Columbia,
                      Brain Res Ctr, Vancouver, BC V6T 1Z3, Canada
COUNTRY OF AUTHOR:    Canada
SOURCE:               JOURNAL OF NEUROSCIENCE, (15 APR 2003) Vol. 23, No. 8, pp.
                      3364-3372.
                      Publisher: SOC NEUROSCIENCE, 11 DUPONT CIRCLE, NW, STE
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500, WASHINGTON, DC 20036 USA.
ISSN: 0270-6474.
DOCUMENT TYPE: Article; Journal
LANGUAGE: English
REFERENCE COUNT: 67

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB **NMDA**-type **glutamate** receptors play a critical role in neuronal synaptogenesis, plasticity, and excitotoxic death. Recent studies indicate that functional **NMDA** receptors are also expressed in certain glial populations in the normal brain. Using immunohistochemical methods, we **detected** the presence of the **NMDA receptor** 2B (**NR2B**) subunit of the **NMDA receptor** in neurons but not astrocytes in the CA1 and subicular regions of the rat hippocampus. However, after **ischemia**-induced neuronal death in these regions, double immunohistochemical labeling revealed that **NR2B** subunits colocalized with the astrocyte marker glial fibrillary acid protein and with NR1 subunits that are required for functional **NMDA** receptors. **NR2B** expression was first observed 3 d after **ischemia** and reached a peak at 28 d. At 56 d, only a few **NR2B**-expressing astrocytes were still present. In vitro, when postnatal hippocampal cultures were subjected to 5 min of anoxia, it resulted in **NR2B** expression on astrocytes in the glial feed layer. Imaging of intracellular calcium with postanoxic cultures and astrocytes isolated acutely from the **ischemic** hippocampus revealed a rise in intracellular [Ca2+] after stimulation with the specific agonist **NMDA.** The response could be blocked reversibly with the competitive antagonist 2-amino-5-phosphonovalerate and attenuated by the **NR2B**-selective antagonist ifenprodil. Control astrocytes were not responsive to **NMDA** but responded to **glutamate** . An understanding of the role of astrocytes that express functional **NMDA** receptors in response to **ischemia** may guide development of novel stroke therapies.

L19 ANSWER 2 OF 4 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN

ACCESSION NUMBER: 2000:139520 SCISEARCH
THE GENUINE ARTICLE: BP50F

TITLE: A double-blind, placebo-controlled study of the safety, tolerability and pharmacokinetics of CP-101,606 in patients with a mild or moderate traumatic brain injury

AUTHOR: Merchant R E (Reprint); Bullock M R; Carmack C A; Shah A K; Wilner K D; Ko G; Williams S A
CORPORATE SOURCE: VIRGINIA COMMONWEALTH UNIV, DIV NEUROSURG, MCV STN, MED COLL VIRGINIA, BOX 980631, RICHMOND, VA 23298 (Reprint); PFIZER INC, DIV CENT RES, GROTON, CT 06340
COUNTRY OF AUTHOR: USA

SOURCE: ANNALS OF THE NEW YORK ACADEMY OF SCIENCES, (NOV 1999) Vol. 890, pp. 42-50.
Publisher: NEW YORK ACAD SCIENCES, 2 EAST 63RD ST, NEW YORK, NY 10021.
ISSN: 0077-8923.
DOCUMENT TYPE: Article; Journal
FILE SEGMENT: LIFE
LANGUAGE: English
REFERENCE COUNT: 11

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB CP-101,606 is a postsynaptic antagonist of the **glutamate** -mediated **NR2B** subunit of the N-methyl-D-aspartate (**NMDA**) **receptor.** When administered intravenously (i.v.) at the time of injury, CP-101,606 Is neuroprotective in animal models of traumatic brain injury (TBI) and **ischemia**, Minimal adverse effects have

been observed in normal human volunteers given i.v. doses of up to 3 mg/kg/hr for 72 hours. The objective of the present clinical trial was to assess the safety, pharmacokinetics, and tolerability of CP-101,606 infused for various times in patients who had suffered either an acute moderate or mild TBI (Glasgow Coma Score 9-14) or hemorrhagic stroke, Patients began receiving treatment within 12 hours of brain injury, ii total of 53 subjects (45 with TBI and 8 with stroke) were randomized in a double-blind fashion to receive CP-101,606 or placebo (4 drug:1 placebo). Drug/placebo was administered by i.v. infusion (0.75 mg/kg/hr) for 2 hours and then stopped (n = 25) or continued for 22 hours (n = 4) or 70 hours (n = 24) at a rate of 0.37 mg/kg/hr, Mean plasma drug concentrations were well above the predicted therapeutic concentration of 200 ng/ml within two hours of initiating treatment and were sustained as long as drug was infused. All the patients tolerated their drug/placebo treatment, and there were no clinically significant cardiovascular or hematological abnormalities in either group. A Neurobehavioral Rating Scale, used to **detect** personality changes and behavioral disturbances, indicated that all subjects showed an improvement from their postinjury, predosing baseline but did not significantly differ from each other with respect to type of head injury and/or treatment with drug or placebo. Modified Kurtzke Scoring also showed a similar pattern of improvement irrespective of type of head injury or drug/placebo treatment. This study suggests that CP-101,606, infused for up to 72 hours has no psychotropic effects and is well-tolerated in patients who have sustained a mild or moderate TBI or hemorrhagic stroke.

L19 ANSWER 3 OF 4 SCISEARCH COPYRIGHT 2004 THOMSON ISI on STN
ACCESSION NUMBER: 1999:53028 SCISEARCH
THE GENUINE ARTICLE: 153QW
TITLE: Comparison of various N-methyl-D-aspartate receptor antagonists in a model of short-term memory and on overt behaviour
AUTHOR: Doyle K M (Reprint); Feerick S; Kirkby D L; Eddleston A; Higgins G A
CORPORATE SOURCE: UNIV HERTFORDSHIRE, DEPT BIOSCI, HATFIELD AL10 9AB, HERTS, ENGLAND (Reprint); GLAXO WELLCOME RES & DEV LTD, MED RES CTR, STEVENAGE SG1 2NY, HERTS, ENGLAND
COUNTRY OF AUTHOR: ENGLAND
SOURCE: BEHAVIOURAL PHARMACOLOGY, (DEC 1998) Vol. 9, No. 8, pp. 671-681.
Publisher: LIPPINCOTT WILLIAMS & WILKINS, 227 EAST WASHINGTON SQ, PHILADELPHIA, PA 19106.
ISSN: 0955-8810.
DOCUMENT TYPE: Article; Journal
FILE SEGMENT: LIFE
LANGUAGE: English
REFERENCE COUNT: 55

ABSTRACT IS AVAILABLE IN THE ALL AND IALL FORMATS

AB This study examined the effects on rat behaviour of antagonists acting at various sites on the N-methyl-D-aspartate (**NMDA**) **receptor** complex, i.e. the **glutamate** recognition site (CPP), ion channel (dizocilpine), glycine recognition site [(+)-HA-966] and the **NR2B** subunit-selective compound ifenprodil. Specifically, the effects of these agents were examined on working memory, assessed using the operant delayed match-to-position task (DMTP), and overt behaviour, assessed (a) in animals responding for food under a variable interval 20-s (VI20) schedule and (b) by spontaneous behaviour. Dizocilpine, CPP and (+)-HA-966 each reduced accuracy in the DMTP task independent of delay. At equivalent doses, changes in locomotor behaviour and VI20 responding were evident. In contrast, ifenprodil failed to impair accuracy in the DMTP task, even at doses that affected other performance

measures and reduced VI20 responding. The relevance of these observations to neuroprotective and anticonvulsant doses of these compounds is considered. Behav Pharmacol 1998; 9:671-681 (C) 1998 Lippincott Williams & Wilkins.

L19 ANSWER 4 OF 4 MEDLINE on STN DUPLICATE 1
ACCESSION NUMBER: 1998199731 MEDLINE
DOCUMENT NUMBER: PubMed ID: 9538905
TITLE: Evidence that functional glutamate receptors are not expressed on rat or human cerebromicrovascular endothelial cells.
AUTHOR: Morley P; Small D L; Murray C L; Mealing G A; Poulter M O; Durkin J P; Stanimirovic D B
CORPORATE SOURCE: Institute for Biological Sciences, National Research Council of Canada, Ottawa, Ontario, Canada.
SOURCE: Journal of cerebral blood flow and metabolism : official journal of the International Society of Cerebral Blood Flow and Metabolism, (1998 Apr) 18 (4) 396-406.
Journal code: 8112566. ISSN: 0271-678X.
PUB. COUNTRY: United States
DOCUMENT TYPE: Journal; Article; (JOURNAL ARTICLE)
LANGUAGE: English
FILE SEGMENT: Priority Journals
ENTRY MONTH: 199804
ENTRY DATE: Entered STN: 19980430
Last Updated on STN: 20000303
Entered Medline: 19980421

AB Excitatory amino acids can modify the tone of cerebral vessels and permeability of the blood-brain barrier (BBB) by acting directly on endothelial cells of cerebral vessels or indirectly by activating receptors expressed on other brain cells. In this study we examined whether rat or human cerebromicrovascular endothelial cells (CEC) express ionotropic and metabotropic glutamate receptors. **Glutamate** and the **glutamate** receptor agonists N-methyl-d-aspartate (NMDA), alpha-amino-3-hydroxy-5-methyl-isoxazole-4-propionic acid (AMPA), and kainate failed to increase [Ca2+]i in either rat or human microvascular and capillary CEC but elicited robust responses in primary rat cortical neurons, as **measured** by fura-2 fluorescence. The absence of NMDA and AMPA receptors in rat and human CEC was further confirmed by the lack of immunocytochemical staining of cells by antibodies specific for the AMPA receptor subunits GluR1, GluR2/3, and GluR4 and the NMDA receptor subunits NR1, NR2A, and NR2B. We failed to **detect** mRNA expression of the AMPA **receptor** subunits GluR1 to GluR4 or the **NMDA receptor** subunits NR1(1XX); NR1(0XX), and **NR2A** to NR2C in both freshly isolated rat and human microvessels and cultured CEC using reverse transcriptase polymerase chain reaction (RT-PCR). Cultured rat CEC expressed mRNA for KA1 or KA2 and GluR5 subunits. Primary rat cortical neurons were found to express GluR1 to GluR3 and NR1, NR2A, and NR2B by both immunocytochemistry and RT-PCR and KA1, KA2, GluR5, GluR6, and GluR7 by RT-PCR. Moreover, the metabotropic glutamate receptor agonist 1-amino-cyclopentyl-1S, 3R-dicorboxylate (1S,3R-trans-ACPD), while eliciting both inositol trisphosphate and [Ca2+]i increases and inhibiting forskolin-stimulated cyclic AMP in cortical neurons, was unable to induce either of these responses in rat or human CEC. These results strongly suggest that both rat and human CEC do not express functional glutamate receptors. Therefore, excitatory amino acid-induced changes in the cerebral microvascular tone and BBB permeability must be affected indirectly, most likely by mediators released from the adjacent glutamate-responsive cells.

```
=> d his

     (FILE 'HOME' ENTERED AT 10:06:44 ON 14 JUN 2004)

     FILE 'MEDLINE, CAPLUS, BIOSIS, SCISEARCH' ENTERED AT 10:07:07 ON 14 JUN
     2004
L1          8537 S LATEX(W)AGGLUTINATION
L2             3 S L1(S)(ISCHEMIA OR ISCHEMIC OR ISCHAEMIA)
L3             3 DUP REM L2 (0 DUPLICATES REMOVED)
L4             8 S L1(P)(ISCHEMI? OR ISCHAEMI?)
L5             4 DUP REM L4 (4 DUPLICATES REMOVED)
L6         84070 S (ISCHEM? OR ISCHAEM?)(S)(BRAIN OR NEUROLOG?)
L7             0 S L6 AND L1
L8            11 S (ISCHEM? OR ISCHAEM?) AND L1
L9             7 DUP REM L8 (4 DUPLICATES REMOVED)
L10         3087 S (NR2A OR NR2B)(S)NMDA(S)RECEPTOR
L11          657 S L10(S)(AGONIST? OR ANTAGONIST?)
L12           43 S (MEASUR? OR DETECT?)(S)L10(S)(AGONIST OR ANTAGONIST)
L13           43 DUP REM L12 (0 DUPLICATES REMOVED)
L14            4 S L12(P)(ISCHEM? OR ISCHAEM?)
L15        24402 S (MEASUR? OR DETECT?)(S)(GLUTAMATE OR POLYGLUTAMATE OR HOMOCYS
L16          222 S (MEASURE? OR DETECT?)(S)(NR2A OR NR2B)(S)NMDA(S)RECEPTOR
L17           83 S L15 AND L16
L18            6 S L17 AND (ISCHEM? OR ISCHAEM?)
L19            4 DUP REM L18 (2 DUPLICATES REMOVED)

=>

---Logging off of STN---


=>
Executing the logoff script...


=> LOG Y

COST IN U.S. DOLLARS                                SINCE FILE      TOTAL
                                                       ENTRY    SESSION
FULL ESTIMATED COST                                   180.22     180.43

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)          SINCE FILE      TOTAL
                                                       ENTRY    SESSION
CA SUBSCRIBER PRICE                                    -0.69      -0.69

STN INTERNATIONAL LOGOFF AT 10:26:37 ON 14 JUN 2004
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